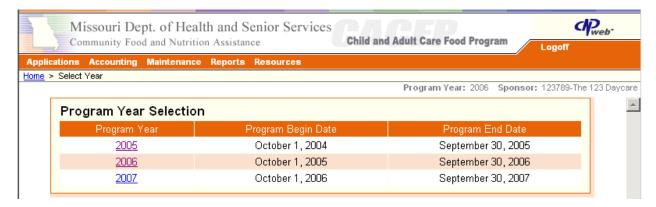
Missouri Department of Health and Senior Services Child and Adult Care Food Program

Online Application Renewal Instructions2007

Some information from your FY 2006 application is automatically repeated in the FY 2007 renewal application. **You must enter other information**. Follow these instructions carefully to submit your 2007 application.

Basic Renewal Steps

1. Log in at http://dhssweb04.dhss.mo.gov/cnp and choose 2007 program year.



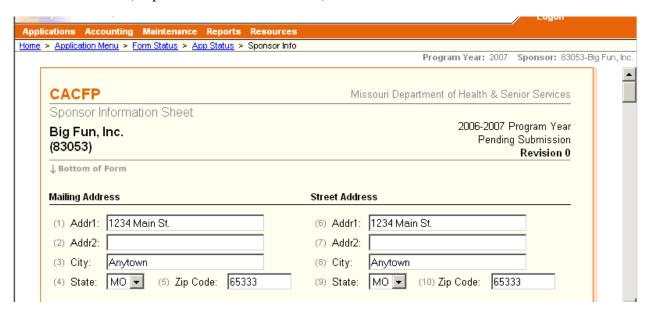
2. The Sponsor Summary Sheet is displayed with the option to <u>Add</u> Sponsor Info Sheet. (make sure Applications tab is highlighted dark orange)



3. Click Add in the Action column.

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4. Review fields 1-27 and 52-57 for accuracy. Make corrections as needed. Complete fields 28-51 (skip fields 31-35 and field 50)



5. Click Submit. Sponsor Information sheet will be "Pending Submission".

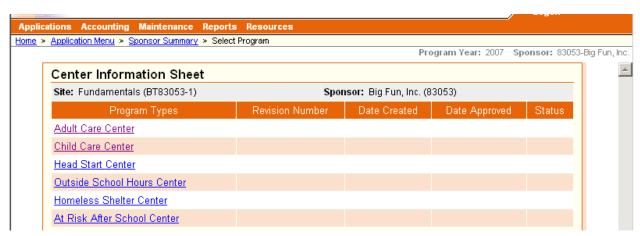


Click here to go to the Sponsor Information Sheet Listing or select another option from the menu above.

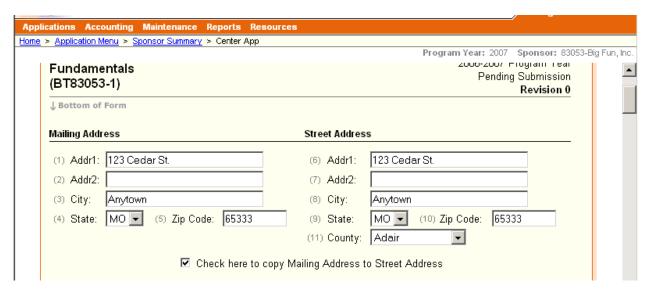
6. Click Add in Action column for Center Information Sheet



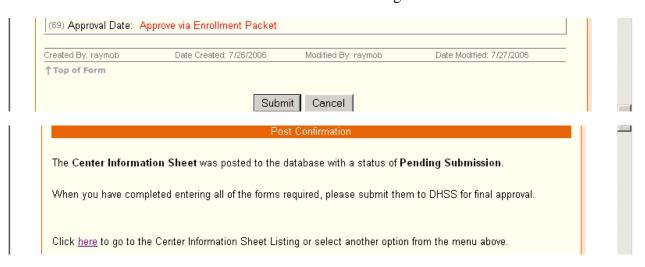
7. Choose appropriate type of center



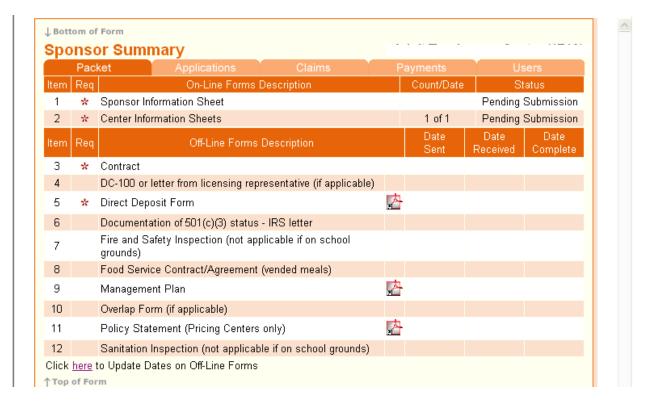
8. Review fields 1-10 and 13-19 for accuracy. Make changes as needed. Complete fields 11, 12, 20-27, and 30-64.



9. Click Submit. Center Information sheet will be "Pending Submission".



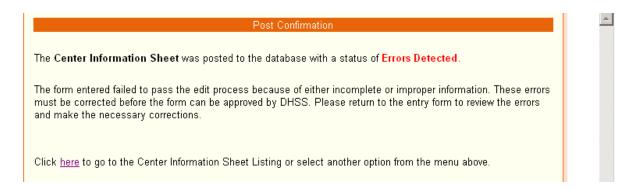
- 10. *If you are a sponsor of multiple sites, repeat steps 5-9 for each site*
- 11. Click on Packet tab to highlight dark orange.
- 12. A list of Off-Line forms will appear. Scroll to bottom of page and click where it says "Click <u>here</u> to Update Dates on Off-Line Forms". Enter the date that you mail each form that applies to you.



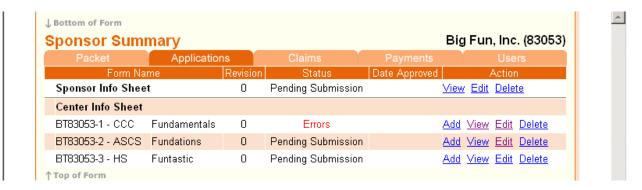
13. Check box above and to the left of Submit button, then click Submit. Before logging off, make sure status is "Pending Approval".

☐ Check here and click on the "Submit" button below for Approval of applications.	
Submit	

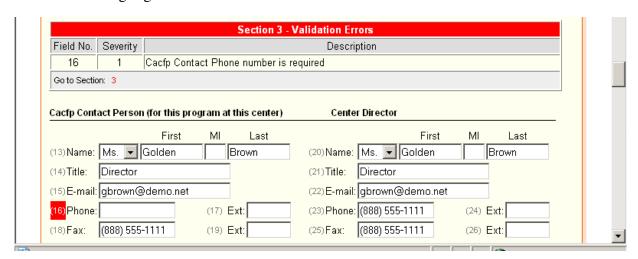
14. If Sponsor or Center Information sheets have errors, the following screen will be displayed. Follow instructions to correct.



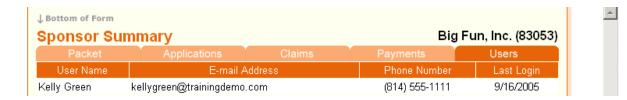
15. Click Edit in the Action column next to the sheet with errors.



16. Errors are highlighted in red. Make corrections and re-submit.



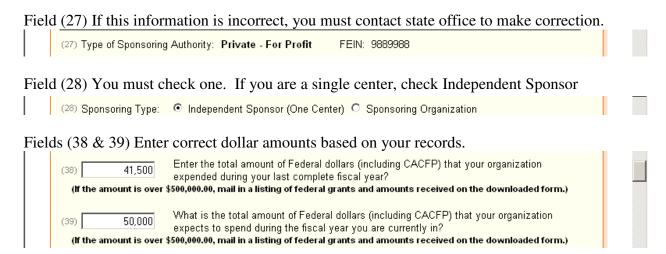
17. Last, but not least, click on the Users tab and make sure the users listed are still the people that you want to have access to the system. To delete a user, email us at CACFP@dhss.mo.gov. To add a user, complete a Network User Access Request form found at http://www.dhss.mo.gov/dnhs_pdfs/CACFP-web-access.pdf. Keeping this up to date is important to your security!



Explanation of Fields

Most fields are self-explanatory. Read here for explanation of certain fields.

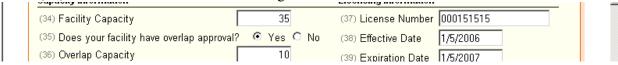
Sponsor Information Sheet:



Center Information Sheet:

Field (36) Overlap capacity is number of extra children you can care for over license capacity.

Field (37) License number should be a 9 digit number.



Field (45) If for profit center eligibility is based on number of DFS paid children, check *Title XX For-Profit*. If eligibility is based on number of free and reduced price children, check *F/RP For Profit*.

Field (47) The number of Free/Reduced should equal the numbers in fields (12 A&B) Title XX For-Profit ● F/RP For-Profit (45) Is this Center 0 (47) Free/Reduced 13 (48) Eligibility 86.6% (46) Title XX Beneficiaries **Enrollment Information** (B) Reduced Paid Total Program Free (12) Child Care Center 10 25 38 Fields (61-65) Complete only if Commercial Vendor is checked. (60) Meal Preparation On Site O Central Kitchen O School O Commercial Vendor € Vendor Contract >= \$10,000.00 (61) For-Profit Centers C Vendor Contract < \$10,000.00 (62) Not For-Profit Centers C Vendor Contract < \$100,000.00 Vendor Contract >= \$100,000.00 **Contract Information** (63) Vendor Name Down Home Cookin'

(65) Contract End Date

6/30/07

7/1/06

(64) Contract Begin Date

Mail copy of current contract to DHSS